

JUL 18 2007

FACSIMILE TRANSMISSION

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DATE: July 18, 2007

TO:

NAME	COMPANY	FAX NO.	PHONE NO.
Commissioner for Patents	USPTO	571-273-8300	

FROM: Rudolf O. Siegesmund

SENDER INFORMATION (NAME / USER ID / EXTENSION): / /

FILE NO.: SUNE 1038568 NUMBER OF PAGES, INCLUDING COVER: 20
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MESSAGE:

Re: Response to Non-Final Office Action dated 04/19/07

Applicant: Hughes
 Application No.: 10/633,471
 Filing Date: 08/01/2003
 Art Unit: 3679
 Title: Improved Tool Joint of Multiple Orientations
 Docket No. AHUG.011

Attached are the following:

1. Response to Non-Final Office Action dated 04/19/07; and
2. Transmittal Page

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TRANSMITTAL
FORM

(to be used for all correspondence after initial filing)

		Application Number	10/633,471
		Filing Date	08/01/2003
		First Named Inventor	Hughes
		Art Unit	3679
		Examiner Name	Hewitt
Total Number of Pages in This Submission	19	Attorney Docket Number	AHUG.011

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		
Response to Non-Final Office Action dated April 19, 2007		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Gordon & Rees, LLP		
Signature	<i>Rudolf O. Siegesmund</i>		
Printed name	Rudolf O. Siegesmund		
Date	July 18, 2007	Reg. No.	37,720

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Signature	<i>Rudolf O. Siegesmund</i>		
Typed or printed name	Rudolf O. Siegesmund	Date	July 18, 2007

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including the gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.: 10/633,471
 Applicant: Hughes
 Filing Date: 08/01/2003
 Group Art Unit: 3679
 Title: Improved Tool Joint of Multiple Orientations

AMENDMENT

Mail Stop Non Fee Amendment
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On July 18, 2007
 Date

Rudolf O. Siegesmund
 Rudolf O. Siegesmund

Dear Sir:

In response to the communication from the Examiner mailed April 19, 2007, please amend the application identified above as follows:

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